

SHUMAKER & SIEFFERT, P.A.
8425 SEASONS PARKWAY, SUITE 105
ST. PAUL, MINNESOTA 55125
TEL 651.735-1100
FAX 651.735-1102
WWW.SSIPLAW.COM

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TO:	FROM:
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U.S. Patent and Trademark Office	June 17, 2005
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
703-872-9306	3
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1023-332US01
RE:	YOUR REFERENCE NUMBER:
Supplemental IDS	Serial No. 10/730,873

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

NOTES/COMMENTS:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant: Ruchika Singhal; Darren A. Janzig; Confirmation No. 4790 JUN 17 2005
Carl D. Wahlstrand; Robert M. Skime;
Paulette C. Olson
Serial No.: 10/730,873
Filed: December 9, 2003 Customer No.: 28863
Examiner: Unknown
Group Art Unit: 3762
Docket No.: 1023-332US01
Title: OVERMOLD FOR A MODULAR IMPLANTABLE MEDICAL DEVICE

CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on June 17, 2005.

By: Caryl C. Harriman
Name: Caryl C. Harriman

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments
Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits the reference listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

Copies of the U.S. patents are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date: 6/17/05

Shumaker & Sieffert, P.A.
8425 Seasons Parkway, Suite 105
St. Paul, Minnesota 55125
Phone: (651) 735-1100
Fax: (651) 735-1102

By: Jason D. Kelly
Reg. No. 54,213

Form 1449* INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION (Use several sheets if necessary)		Docket Number: 1023-332US01		Application Number: 10/730,873	
		Applicant: Ruchika Singhal; Darren A. Janzig; Carl D. Wahlstrand; Robert M. Skime; Paulette C. Olson			
		Filing Date: December 9, 2003		Group Art Unit: 3762	
		Examiner Name: Unknown			
U.S. PATENT DOCUMENTS					
Examiner Initial	Document Number	Issue/Document Publication Date	Name	Filing Date If Appropriate	
	5,085,644	02/04/1992	Watson et al.		
	5,314,451	05/24/1994	Mulier		
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	6,626,680	09/30/2003	Ciurzynski et al.		
FOREIGN PATENT DOCUMENTS					
Examiner Initial	Document Number	Publication Date	Country	Translation	
				Yes	No
OTHER DOCUMENTS (Including Authors, Title of Item, Page(s), Vol/Issue No., Publisher, Place of Publication)					
EXAMINER			Date Considered		
*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.					

Based on Form PTO-FB-A820
(Also form PTO-1449)

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